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|---|------------------------------|--|--------------------------------------|---|------|------------------------------|--|--|---|--------------------------|--|--|--|---------|----------------------------|--|--|---------------------------|--|--|--|------|-----------|-------|----|----------|---------|--------|-----------|--------------|-----|
| UTILITY PATENT APPLICATION TRANSMITTAL | | Attorney Docket No. | 01132/4/US | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | First Inventor | Amidon, G.E. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Title | Sustained-Release Tablet Composition | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Express Mail Label | ER 078630392 US | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| APPLICATION ELEMENTS <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> <small>See MPEP chapter 600 concerning utility patent application contents.</small> | | ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P. O. Box 1450 Alexandria VA 22313-1450 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> | | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small> | | 8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. <input checked="" type="checkbox"/> Specification <small>[Total Pages</small> 42 <small>]</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <small>(if filed)</small> - Detailed Description - Claim(s) - Abstract of the Disclosure | | a. <input type="checkbox"/> Computer Readable Form (CRF) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>[Total Sheets</small> 3 <small>]</small> | | b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Oath or Declaration <small>[Total Pages</small> <small>]</small> | | c. <input type="checkbox"/> Statements verifying identity of above copies | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a. <input type="checkbox"/> Newly executed (original or copy) | | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> | | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(when there is an assignee)</small> <input type="checkbox"/> Power of Attorney | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small> | | 11. <input type="checkbox"/> English Translation Document <small>(if applicable)</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | | 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: | | 13. <input type="checkbox"/> Preliminary Amendment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ / _____ | | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> Certified Copy of Priority Document(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prior application information: Examiner _____ | | Group / Art Unit: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. CORRESPONDENCE ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Customer Number or Bar Code Label | | 26648 <small>(Insert Customer No. or Attach bar code label here)</small> | | or <input checked="" type="checkbox"/> Correspondence address below | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 5px;">Name</td> <td colspan="3" style="padding: 5px;">PHARMACIA CORPORATION</td> <td rowspan="2" style="width: 15%; vertical-align: middle; text-align: center; padding: 5px;">or <input checked="" type="checkbox"/> Correspondence address below</td> </tr> <tr> <td style="padding: 5px;">Global Patent Department</td> <td colspan="3" style="padding: 5px;"></td> </tr> <tr> <td style="width: 15%; padding: 5px;">Address</td> <td colspan="3" style="padding: 5px;">575 Maryville Centre Drive</td> </tr> <tr> <td style="padding: 5px;">5th Floor, Mail Zone 1006</td> <td colspan="3"></td> </tr> <tr> <td style="width: 15%; padding: 5px;">City</td> <td style="width: 25%; padding: 5px;">St. Louis</td> <td style="width: 15%; padding: 5px;">State</td> <td style="width: 25%; padding: 5px;">MO</td> <td style="width: 15%; padding: 5px;">Zip Code</td> </tr> <tr> <td style="padding: 5px;">Country</td> <td style="padding: 5px;">U.S.A.</td> <td style="padding: 5px;">Telephone</td> <td style="padding: 5px;">314-274-6812</td> <td style="padding: 5px;">Fax</td> </tr> </table> | | | | | Name | PHARMACIA CORPORATION | | | or <input checked="" type="checkbox"/> Correspondence address below | Global Patent Department | | | | Address | 575 Maryville Centre Drive | | | 5th Floor, Mail Zone 1006 | | | | City | St. Louis | State | MO | Zip Code | Country | U.S.A. | Telephone | 314-274-6812 | Fax |
| Name | PHARMACIA CORPORATION | | | or <input checked="" type="checkbox"/> Correspondence address below | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Global Patent Department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | 575 Maryville Centre Drive | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5th Floor, Mail Zone 1006 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | St. Louis | State | MO | Zip Code | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Country | U.S.A. | Telephone | 314-274-6812 | Fax | | | | | | | | | | | | | | | | | | | | | | | | | | | |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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13409 U.S. PTO
07/24/03

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **\$1,224.00**

Complete if Known

| | |
|----------------------|----------------|
| Application Number | To Be Assigned |
| Filing Date | July 24, 2003 |
| First Named Inventor | Amidon, G.E. |
| Examiner Name | To Be Assigned |
| Group Art Unit | To Be Assigned |
| Attorney Docket No. | 01132/4/US |

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number **19-1025**

Deposit Account Name **Pharmacia Corporation**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Description | Fee Paid |
|---------------------|---------------|------------------------|---------------|
| Fee Code (\$) | Fee Code (\$) | | |
| 1001 750 | 2001 375 | Utility filing fee | 750.00 |
| 1002 330 | 2002 165 | Design filing | |
| 1003 520 | 2003 260 | Plant filing fee | |
| 1004 750 | 2004 375 | Reissue filing | |
| 1005 160 | 2005 80 | Provisional filing fee | |
| SUBTOTAL (1) | (\$) | \$750.00 | |

2. EXTRA CLAIM FEES FOR UTILITY AND

| | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|------------------------------------|----------|
| Total Claims | 37 | -20** = 17 X 18.00 = 306.00 | |
| Independent Claims | 5 | - 3** = 2 X 84.00 = 168.00 | |
| Multiple Dependent | | | |

| Large Entity | Small Entity | Fee Description |
|---------------------|---------------|--|
| Fee Code (\$) | Fee Code (\$) | |
| 1202 18 | 2202 9 | Claims in excess of 20 |
| 1201 84 | 2201 42 | Independent claims in excess of 3 |
| 1203 280 | 2203 140 | Multiple dependent claim, if not paid |
| 1204 84 | 2204 42 | ** Reissue independent claims over original patent |
| 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) | (\$) | \$474.00 |

**or number previously paid, if greater; For Reissues, see above

| 3. ADDITIONAL FEES | | Large Entity | Small Entity | Fee Description | Fee Paid |
|---------------------------|---------------|---------------------|--------------|--|----------|
| Fee Code (\$) | Fee Code (\$) | 1051 130 | 2051 65 | Surcharge - late filing fee or oath | |
| 1052 50 | 2052 25 | 1052 50 | 2052 25 | Surcharge - late provisional filing fee or cover sheet | |
| 1053 130 | 1053 130 | 1053 130 | 1053 130 | Non - English specification | |
| 1812 2,520 | 1812 2,520 | 1812 2,520 | 1812 2,520 | For filing a request for ex parte reexamination | |
| 1804 920* | 1804 920* | 1804 920* | 1804 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 1,840* | 1805 1,840* | 1805 1,840* | 1805 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 110 | 2251 55 | 1251 110 | 2251 55 | Extension for reply within first month | |
| 1252 410 | 2252 205 | 1252 410 | 2252 205 | Extension for reply within second month | |
| 1253 930 | 2253 465 | 1253 930 | 2253 465 | Extension for reply within third month | |
| 1254 1,450 | 2254 725 | 1254 1,450 | 2254 725 | Extension for reply within fourth month | |
| 1255 1,970 | 2255 985 | 1255 1,970 | 2255 985 | Extension for reply within fifth month | |
| 1401 320 | 2401 160 | 1401 320 | 2401 160 | Notice of Appeal | |
| 1402 320 | 2402 160 | 1402 320 | 2402 160 | Filing a brief in support of an appeal | |
| 1403 280 | 2403 140 | 1403 280 | 2403 140 | Request for oral hearing | |
| 1451 1,510 | 1451 1,510 | 1451 1,510 | 1451 1,510 | Petition to institute a public use proceeding | |
| 1452 110 | 2452 55 | 1452 110 | 2452 55 | Petition to revive - unavoidable | |
| 1453 1,300 | 2453 650 | 1453 1,300 | 2453 650 | Petition to revive - unintentional | |
| 1501 1,300 | 2501 650 | 1501 1,300 | 2501 650 | Utility issue fee (or reissue) | |
| 1502 470 | 2502 235 | 1502 470 | 2502 235 | Design issue fee | |
| 1503 630 | 2503 315 | 1503 630 | 2503 315 | Plant issue fee | |
| 1460 130 | 1460 130 | 1460 130 | 1460 130 | Petitions to the Commissioner | |
| 1807 50 | 1807 50 | 1807 50 | 1807 50 | Processing fee under 37 CFR § 1.17(q) | |
| 1806 180 | 1806 180 | 1806 180 | 1806 180 | Submission of Information Disclosure Statement | |
| 8021 40 | 8021 40 | 8021 40 | 8021 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 750 | 2809 375 | 1809 750 | 2809 375 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 750 | 2810 375 | 1810 750 | 2810 375 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 1801 750 | 2801 375 | 1801 750 | 2801 375 | Request for Continued Examination (RCE) | |
| 1802 900 | 1802 900 | 1802 900 | 1802 900 | Request for expedited examination of a design application | |
| Other fee (specify) _____ | | SUBTOTAL (3) | (\$) | | |

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(\$)**

SUBMITTED BY

| | | | | | |
|-------------------|------------------------|-----------------------------------|--------|-----------|---------------|
| Name (Print/Type) | James C. Forbes | Registration No. (Attorney/Agent) | 39,457 | Telephone | 847-581-6090 |
| Signature | <i>James C. Forbes</i> | | | Date | July 24, 2003 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

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